

**National Resource Center on Nutrition and Aging**  
**FAQ: Managing Older Americans Act (OAA) Funded Senior**  
**Nutrition Programs (Title III C-1, C-2, and NSIP)**  
**During Emergencies**

*Updated: August 2021*

*During an emergency, senior nutrition programs will need to adapt their services, activities, and events to continue safely supporting their communities. This FAQ provides information to help programs plan for, and adapt to, some of the most common emergencies that they may face. The strategies and suggestions in this guide are not exhaustive and should be adapted and modified to meet your situation. In addition, a prudent program administrator will develop emergency plans, policies, and procedures well in advance and review the plans annually.*

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## Plans, Protocols, & Practices

### **In an emergency, what protocols or practices should be in place for senior nutrition services?**

All senior nutrition services should have emergency protocols and Continuity of Operations Plans (COOP) in place. If your community mandates a shutdown or shelter-in-place (e.g., due to natural or human-caused disasters, pandemic) it is critical that policies and practices should be in place to address issues such as providing meals, ensuring client health and safety, etc.

It is also important to have established community partnerships that can assist you during emergencies. Examples of trusted partnerships include police and fire departments, and other entities such as the American Red Cross that have the capability, community trust factor, and authority to enter homes and deliver meals. You should partner with state and local emergency management agencies and/or public health agencies, depending on the situation.

In addition, preplanning for the emergency should include talking to local authorities to determine if your staff can be deemed essential. If so, you should decide in advance who is considered an essential worker and communicate that information to your staff and ensure staff are cross trained. Consider reassigning job responsibilities during an emergency so you can continue to perform mission-critical duties. A priority should be ensuring the safety of their employees.

For the most accurate, up-to-date information, we recommend you follow communications from your state and local health departments and emergency management agencies.

### **Can you share examples of emergency preparedness plans?**

We recommend that you work with your state and local health departments and emergency management agencies to develop and practice emergency plans. These plans should prioritize services for seniors most in need and address how and when to use shelf-stable, frozen, and other meal delivery options.

The Federal Emergency Management Agency (FEMA) has a number of helpful resources, including information on [emergency preparedness for community-based organizations](#), as well as, Ready, FEMA's national public service campaign, which has information on [developing emergency plans](#) and [how to create an emergency kit](#). In addition, the National Association of County & City Health Officials and Association of State and Territorial Health Officials have developed a toolkit on [how to build capacity for including aging and disability networks in emergency planning](#). These are just a few examples of available resources, and you are encouraged to search for other resources specific to the population you serve as needed.

Also, program experiences and approaches from other states can be found on the Nutrition Listserv, which is available to State Unit on Aging (SUA) nutrition directors and professionals. For more information, please contact your SUA nutrition professional.

## **Meals & Nutrition Requirements**

### **What are some ways to provide emergency food assistance to older adults during an emergency?**

The decision about how to provide emergency food assistance to older adults during an emergency is a local and state decision. Some examples include partnering with local food banks/pantries and working with U.S. Department of Agriculture (USDA) programs, like the Senior Nutrition Assistance Program (SNAP). For examples of other partnerships, visit the [Nutrition and Aging Resource Center](#).

### **Is it important to maintain senior nutrition requirements during an emergency?**

The OAA requires that the [Dietary Reference Intakes \(DRIs\)](#) and the [Dietary Guidelines for Americans \(DGAs\)](#) be adhered to by Title III-C senior nutrition programs. While flexibility may be helpful when food supplies may be scarce, in order to ensure older adults have food in their homes, maintaining nutrition requirements for seniors, even during an emergency, is extremely important to ensure seniors stay healthy. Meeting dietary requirements may be easier than you think. See [Understanding Nutrition Requirements During COVID-19: DRIs and DGAs](#) (Jun 2021) for guidance regarding the importance of meeting nutritional needs and also for meal planning ideas that meet the DRIs/DGAs.

### **Can ACL waive nutrition requirements?**

Since it is in the OAA statute, ACL does not have the authority to waive nutritional requirements for meals funded through Title III C-1, C-2, or the Nutrition Services Incentive Program (NSIP). In cases where an emergency is raised to the level of a Presidential major disaster declaration (i.e., COVID-19

crisis), Congressional authority may choose to waive requirements. When a decision is made to do so, ACL will provide further guidance to the network.

If you are having difficulty meeting DRIs/DGAs, the Nutrition Resource Center on Nutrition and Aging highlights [success stories](#) from the network on how this can be done. You can also contact your local SUA or ACL Regional Administrator (RA) for guidance.

Food and nutrition assistance funded via other OAA sources, such as Title III-B or Title III-E (for family caregivers) are not required to meet DRI/DGA requirements; however, we encourage that these requirements are met to the greatest extent possible.

### **Can ACL waive the 5 days-a-week meal requirement?**

During an emergency, you do not need a waiver from ACL for this adjustment. Your SUA has the ability to approve a lesser frequency for meals, including if your program is in a rural area where such frequency is not feasible.

For more information regarding this requirement, contact your RA for guidance.

### **In an emergency, is there flexibility in how meals are distributed (e.g., send a meal home with a congregate meal participant, offer grab and go, drive-up)?**

Yes. Even in non-emergency situations, you have flexibility in how meals are distributed. How you report it depends on whether they are eating a meal in a congregate or home setting. Refer to the SPR definition to determine if it is a Title III C-1 or C-2 meal.

NSIP funds may also be used to pay for these meals as long as program participants and meals meet NSIP requirements (e.g., domestically produced).

A prudent program administrator should collect information for all congregate participants in advance in case those participants request a home-delivered meal during an emergency, enhance protocols for making referrals between congregate and home delivered meal providers, and may want to include flexible language in their grants/contracts on sources of funding they may use in event of emergency. In addition, we understand local and state procurement requirements may limit flexible approaches; we will continue to monitor any expressed concerns, in order to address this in the future. Please reach out to your RA should you have issues where we can provide technical assistance.

### **To accommodate additional logistics that may arise because of an emergency, can a Title III funded meal be served outside of the lunch hour?**

Yes. The OAA does not address specific implementation issues. States, territories, and tribes are responsible for developing policies, procedures, and technical assistance for program administration. The OAA requires you to consult with your participants to decide the best time to serve breakfast, lunch, and dinner based on their needs and preferences. This requirement is true in both emergency and non-emergency situations.

## **To prepare for an emergency or potential food shortage, should we purchase large quantities of shelf-stable food?**

Your program will need to make this decision based on the local guidance for your area. However, it is important not to buy more food than can be used effectively, keeping in mind expiration dates and storage. Remember to rotate stock as needed and consider donating food that has not been used before it expires so that it does not go to waste if no emergency occurs.

It is also important to educate your participants about having their own stock of emergency food, water, and other supplies. The [American Red Cross](#) recommends that each person has two weeks of supplies on hand during an emergency. The University of Minnesota offers guidance on [how to prepare for a two-week emergency food supply](#). Additionally, Ready, FEMA's national public service campaign, has information [about how individuals can plan for different types of emergencies](#).

Remember that community partners may also be able to provide food assistance during an emergency, and a prudent program administrator should develop these partnerships in advance.

## **When are providers allowed to distribute emergency meals to program participants for planned weather-related emergencies?**

The OAA does not address this. Policies and procedures should be at the SUA and AAA level regarding the distribution of emergency meals for planned weather-related emergencies, such as winter storms and hurricanes. A prudent program administrator should review these policies and procedures at least annually. It is generally good practice to have meals in a participant's home before any anticipated service interruptions and a check in with participants to identify if meals need to be replenished. Program participants should be informed about the use of emergency meals, and meals should be consumed within one year or by the expiration date. Note that all meals should be labeled with an expiration date. You should ensure that the program participant has the equipment, such as a microwave, and capability to heat meals.

## **If we provide emergency meals (e.g., shelf stable, frozen, grab and go) to people who usually attend a congregate meal site, is it considered a congregate (Title IIIC-1) or home-delivered (Title IIIC-2) meal?**

Meals that are intended to be consumed in an eligible participant's home are reported as home-delivered (Title IIIC-2). Meals may be provided via home delivery, pick-up, carry-out or drive-through.

Congregate meals (Title IIIC-1) are meals provided in a congregate or group setting to include meals eaten with another person (in-person or virtually), such as virtual buddy systems or congregate sites (via Zoom, FaceTime, GoToMeeting, etc.) where people dine together.

## Logistics

### **What happens if an emergency causes major disruptions to program logistics (i.e., kitchen staff, driver, and volunteer shortage; mandated shutdowns or stay-at-home orders; facility safety shutdowns such as for a gas leak; surge in demand from participants; or disruption to supply chains, etc.)?**

Emergency protocols and COOP should already be established in case an emergency causes major disruptions to program logistics. Staff shortages, for example, may necessitate you to offer other delivery options, such as grab and go, drive-up, and drive-through meals; use of emergency staff for meal delivery; or use of shelf-stable and frozen meals. Depending on the nature of the emergency, you may also want to factor in well-being checks. We recommend you work with your state and local health departments and local emergency management agencies to decide how to handle such situations.

### **If a meal site is shut down, can you offer meals at another location?**

Yes, if a site (congregate meal site or meal prep site for home-delivered meals) is shut down due to an emergency, you may move to another location provided there is another site available within your catchment area that has not been affected and can accommodate additional participants or meal preparation there. A prudent program administrator should identify alternative, accessible locations in advance. If the meal site is not near the original location, you should provide transportation for seniors.

The SUA and Area Agency on Aging (AAA) should ensure that current policies address procedures for moving a nutrition site in case of emergencies. The OAA provides guidance on the types of structures permitted as meal sites. For example, a meal site can be moved to a temporary food facility, such as a firehouse, religious institution, park, or recreation site. Program providers should work with local health authorities to ensure requirements for temporary food facilities are met (e.g., application, inspection). The building should also be accessible for older adults who have limited mobility such as using a walker or wheelchair.

You should also plan for how you will provide emergency meals for participants who cannot access your alternative site, as well as your regular home-delivered meals. Prioritize seniors as needed. If needed, set up a temporary food facility or encourage program participants to consume shelf-stable or emergency meals that you have delivered.

*For reference: OAA SEC. 339. NUTRITION A state that establishes and operates a nutrition project under this chapter shall ensure that the project provides meals that comply with applicable provisions of state or local laws regarding the safe and sanitary handling of food, equipment, and supplies used in the storage, preparation, service, and delivery of meals to an older individual.*

### **What are some suggestions for dealing with vendor shortages during an emergency?**

We do not have information on the availability of supplies or vendors. However, you can find experiences and approaches from other programs on the Nutrition Listserv, which is available to the SUA nutrition directors and professionals. For more information, please contact your SUA nutrition professional. When dealing with shortages, past history has shown that it is best to work with your local

vendors and restaurants. Additionally, a prudent program administrator should create a list of alternative vendors to be used as back-up in case of an emergency.

### **In an emergency, can agencies do home-delivered meal assessments via phone or the internet?**

OAA does not make provisions for when or how home-delivered meal determinations or assessments are done. The SUA has the flexibility to make this decision or pass the decision to the AAA Policies and procedures should be in place and this flexibility should be included in emergency plans.

## **Safety**

### **What safety recommendations can you provide for participants, staff, and volunteers during an emergency?**

The National Resource Center on Nutrition and Aging is not the authority on safety protocol, however, some basic recommendations include the following:

For emergencies situations, contact 911. We recommend that you follow specific safety guidance from your state and local health departments and emergency management agencies. For public health emergencies or health-related issues, CDC also may be a resource. State and local health departments and emergency management agencies as well as CDC and FEMA may have communications toolkits and resources that can be adapted for messaging on safety recommendations.

We also recommend that you have policies and procedures in place for emergencies, such as individual office or agency building evacuation plans, and that those policies/plans be availability to, and practiced with, staff and volunteers.

### **What triggers no contact or socially distanced delivery protocols?**

There is no specific federal law, such as the OAA, or ACL regulation that determines this. We recommend that you follow your state and local public health and emergency management agencies' guidance on when such protocols are triggered. CDC may also be a resource.

## **Communication**

### **How should we communicate with program participants, families, and caregivers during emergencies?**

During emergencies, we encourage you to work with your state and local health departments and other trusted partners to communicate with program participants, families, and caregivers. For more information, contact your local SUA nutrition professional. Your organization should also establish backup or alternate communication methods in case your primary communications methods are inaccessible or don't work during an emergency. For example, you may want to ensure contact lists are available in non-electronic formats in case of power outages.

To help ensure you reach as many people as possible during an emergency, a prudent program administrator should issue communications in a variety of formats, such as letter, email, voicemail

message recording, and social media and website posts. Communications should explain the nature of the emergency, how it will affect programs and services, contact information for participants who have questions, and where to find the latest, up-to-date information (e.g., your website, local media). Ensure that communication is accessible to all people and is appropriate for the population you serve (e.g., language, trauma, cognitive and physical disabilities). For example, for people with low literacy, use plain language and pictograms. For individuals with disabilities, consider accessibility such as using larger font, sign language interpreters, and captioning, and using alt text and closed-captioned videos on social media posts.

Depending on your community, consider issuing communications in multiple languages. You may also want to contact your local TV and radio stations, which can quickly disseminate information to the community at large.

For more information, the nonprofit organization SCORE, a resource partner of the U.S. Small Business Administration, has information [on how to prepare for a crisis, including a downloadable crisis communications planning checklist](#). While this information does not specifically address accessible communication, the guidance provides sound advice and should be modified to address accessible communication.

## Staff & Volunteers

### **In an emergency, what changes to volunteers should we anticipate?**

During an emergency, your pool of volunteers may change. As such, a prudent administrator would have a backup plan to volunteers (i.e., looking at reassigning your staff ahead of time, your local partnerships such as government and non-profit). If calling for volunteers during an emergency, we recommend that you continue to screen your volunteers.

## Funding & Reporting

### **If frozen, shelf-stable, or “FEMA meals” are used for congregate meal participants during an emergency, can those meals be reported as home-delivered meals for the State Program Report (SPR)?**

Yes, these meals can be used for a congregate meal participant during an emergency. However, frozen, shelf-stable, and FEMA meals must be counted for programmatic reporting purposes under Title III C-2 (i.e., home-delivered meals). Meals must conform to the DRIs/DGAs. We understand that during an emergency, food supplies may be limited and meeting DRIs/DGAs may be challenging. Resources on the National Resource Center on Nutrition and Aging are available to assist network organizations during emergencies. Please contact your RA if you require additional guidance.

### **If frozen, shelf-stable, or “FEMA meals” are used for congregate meal participants during an emergency, can those meals be reported as home-delivered meals for the NSIP report?**

It depends. For NSIP reporting purposes, frozen, shelf-stable, or FEMA meals must meet nutrition requirements and program participants must meet NSIP eligibility. Absent Congressional action, such meals reported as NSIP meals must meet the DRIs/DGAs. A prudent program administrator would count

the meal when it is served. For more information, see guidance for understanding nutrition requirements during COVID-19 (DRIs/DGAs) [here](#) and NSIP requirements [here](#).

### **When do we count an emergency meal as delivered to a program participant?**

The OAA does not address this issue. However, it is recommended that the meal be counted when it is delivered.

### **When NSIP funding has been affected by disasters (NSIP funding will likely decrease next year because of the pandemic), do you provide accommodations for states, territories, or tribes?**

NSIP funding is distributed to the SUA and Title VI grantees based on the number of eligible meals served in the prior year as a proportion to the number of meals served by all states, territories, and tribes. It is possible, therefore, that funding could decrease because fewer meals are served. Historically, a national emergency such as the COVID-19 pandemic, ACL made accommodations to hold harmless the NSIP allocations for reporting purposes. If a disaster of that magnitude occurs again, ACL will inform SUAs and local providers of any change in this requirement.

Remember that to limit the impact of serving fewer meals, you may deliver shelf-stable, frozen, grab and go, drive-up, drive-through and home-delivered meals, to be consumed on days when service may be disrupted. Meals that are given out and taken home to consume are reported as home delivered meals (Title III-C-2). In addition, when Title III-C program participants consume their shelf-stable meals during an emergency, you may deliver additional meals to replenish those meals.

To count a meal as NSIP eligible, emergency meals must meet NSIP requirements. Meal kits will need to meet nutritional requirements, or include a food component, such as milk or fruit. You may count replenished shelf-stabled meals as NSIP meals if the meals and the program participants meet NSIP requirements.

Because it is impossible to know when meals are actually consumed, shelf-stable, frozen, grab and go, drive-up, and drive-through meals can be counted when they are delivered.

### **If a nutrition provider has a fire at their facility, and they lost food inventory, would the U.S. Department of Agriculture (USDA) assist in providing reimbursement for commodities that are lost?**

The USDA does provide supplemental nutrition assistance in response to numerous types of emergencies and disasters, including but not limited to hurricanes, tornadoes, severe storms, and flooding so the fire would have to be a result from an emergency event. To qualify, these emergencies must be Presidentially declared emergencies, such as a Major Disaster Declaration by the President. Money to buy and replenish food stocks used in emergencies comes from special funds that are available to the Secretary of Agriculture. For more information, contact the USDA Food and Nutrition Service Public Information Staff at 703-305-2281, or by mail at 3101 Park Center Drive, Room 819, Alexandria, Virginia 22302. USDA's website also has information on [Disaster Assistance Programs](#).

Facilities that store food should have insurance for fires, floods, and other unexpected occurrences, so you should refer to the facility's insurance policy to determine if the value of the donated foods is covered.